Purpose:

This policy is provides guidance when an ambulance is responding to a scene or from a scene and a secondary medical incident occurs. This policy is to be used as a general guideline since every incident and transport situation is different.

Policy:

1. **Secondary medical incident while responding to a call for medical assistance.**

   a. **Emergent:** if the call you are responding to is emergent in nature and you come across a secondary incident that appears to be life-threatening, the responding ambulance will stop to render immediate medical aid. If it is a city ambulance a request will be made to Westcom to send another ambulance to the call you were originally responding too. If you come across an incident that does not appear to be life-threatening then you will proceed to the original request for assistance and notify Westcom to send another ambulance to the incident you bypassed.

When a hospital ambulance comes across a secondary medical incident they will follow the same guidelines as above with the exception that they will contact the dispatcher at Methodist. Depending on the location and nature of the originating call, the hospital ambulance may treat at the scene and transfer care to the ambulance crew of the jurisdiction that the call is in rather than
transporting themselves. After turning over care, the hospital ambulance will then continue to its original destination.

Caution should be used when transferring care to another ambulance crew that is not at the same level as the hospital ambulance crew. If the patient requires a higher level of care than can be provided by that jurisdictional crew, we should either transport that patient to the hospital or treat it like a tiered response and ride in with that ambulance with our equipment. Failure to accompany a patient that requires a level of care that we can provide but the transporting ambulance cannot provide could be considered abandonment of the patient.

b. **Non-emergent**: If the call you are responding to is non-emergent in nature and you come across a secondary incident where it appears medical assistance is needed, the responding ambulance will stop to render immediate medical aid. Westcom should be notified to send another ambulance to the original request for service.

When a hospital ambulance comes across a secondary medical incident they will follow the same guidelines as above with the exception that they will contact the dispatcher at Methodist. Depending on the location and nature of the originating call, the hospital ambulance may treat at the scene and transfer care to the ambulance crew of the jurisdiction that the call is in rather than transporting themselves. After turning over care, the hospital ambulance will then continue to its original destination.

Caution should be used when transferring care to another ambulance crew that is not at the same level as the hospital ambulance crew. If the patient requires a higher level of care than can be provided by that jurisdictional crew, we should either transport that patient to the hospital or treat it like a tiered response and ride in with that ambulance with our equipment. Failure to accompany a patient that requires a level of care that we can provide but the transporting ambulance cannot provide, could be considered abandonment of the patient.

2. **Secondary Medical Incident during the transport of a patient.**

If during the transport of a patient to the hospital you come across a secondary medical incident that appears life threatening in nature, you should stop to render aid until another ambulance arrives unless stopping will be detrimental to the condition of the patient you are transporting. If unable to stop, Westcom or Methodist Dispatch should be notified of the secondary incident and told to send an ambulance to that incident. It should also be verbalized over the radio that you are unable to stop due to the condition of the patient you are transporting.
If patient condition will not be affected by stopping at an incident then you should stop and render aid. The appropriate level of medical personnel must remain with the patient being transported while the secondary attendant(s) provide(s) aid to the secondary incident. It could be considered abandonment of the patient being transported if the appropriate level of care provider does not remain with the patient.

*Examples of life threatening situations would be cardiac arrest, respiratory arrest, unresponsive person, uncontrolled bleeding, airway compromise etc.*